



EXPRESS MAIL MAILING LABEL NO. EV931174540US

TRANSMITTAL
FORM

Application Number	09/848,931
Filing Date	May 4, 2001
First Named Inventor	Robert Feilbogen
Group Art Unit	3692
Examiner Name	Nga B. Nguyen
Attorney Docket No.	AIG-001
Patent No.	Not Applicable
Issue Date	Not Applicable

ENCLOSURES (check all that apply)

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Check Attached
<input checked="" type="checkbox"/> Copy of Fee Transmittal Form | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) | <input type="checkbox"/> Request for Certificate of Correction |
| <input checked="" type="checkbox"/> Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] | <input type="checkbox"/> Replacement Drawing(s) | <input type="checkbox"/> Certificate of Correction |
| <input checked="" type="checkbox"/> Petition for Extension of Time | <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences |
| <input type="checkbox"/> Information Disclosure Statement
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<input type="checkbox"/> Copies of IDS Citations | <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) | <input type="checkbox"/> Appeal Brief |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> Status Inquiry |
| <input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
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<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application | <input checked="" type="checkbox"/> Return Receipt Postcard |
| | <input type="checkbox"/> Small Entity Statement | <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 |
| | <input type="checkbox"/> CD(s) for large table or computer program | <input type="checkbox"/> Additional Enclosure(s) (please identify below) |
| | <input type="checkbox"/> Amendment After Allowance | |

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